

UTILITY  
PATENT APPLICATION  
TRANSMITTAL

Attorney Docket No.  
21482/0069

1482/00069

First Named Inventor or Application Identifier

Michel Cantagrel

Title

Overvoltage-Protection Device

Express Mail Label No.

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

APPLICATION ELEMENTS

ADDRESS TO:

Commissioner for Patents  
Box Applications  
Washington, D.C. 20231

1. ☒ Filing fee as calculated below.
2. ☒ Applicant claims small entity status  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages **[6]**]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) [Total Pages **[1]**]
5. Oath or Declaration [Total Pages **[1]**]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 16 completed)
    - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR 1.63(d)(2)  
and 1.33(b)
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ Microfiche Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence  
Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS  
Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☒ Certified copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☒ Other: Verification of translation

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR § 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code  
label here)

or ☒ correspondence address below

NAME

Connolly Bove Lodge & Hutz LLP

ADDRESS

Suite 800

1990 M Street, N.W.

CITY

Washingt n

STATE

DC

ZIP CODE

20036-3425

COUNTRY

U.S.A

TELEPHONE



(202) 331-7111

FAX

(202) 293-6229

			(Col 1)		(Col 2)	(Col 3)	SMALL ENTITY		OR	NON-SMALL ENTITY	
			NO. FILED			NO. EXTRA	RATE	FEE		RATE	FEE
TOTAL	2	minus	20	=	__		x9=	\$		x18=	\$
INDEP	1	minus	3	=	__		x40=	\$		x80=	\$
_ First Presentation, Multiple Dependent Claims							+135=	\$		+270=	\$
Base Filing Fee								\$355			\$710
Other Fee (specify purpose) _____ <u>Assignment recordal</u>								\$40			\$
TOTAL FILING FEE* (accounting for possible small entity status)								\$395	OR	TOTAL	\$

- ☒ A check in the amount of \$395 to cover the filing fee is enclosed.
- ☐ No payment is enclosed at this time. Full payment will be made when the executed Declaration is submitted.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. **22-0185** as described below. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of \$\_\_ as filing fee
- ☒ Credit any overpayment.
- ☒ Charge any additional filing fees required under 37 CFR § 1.16
- ☒ Charge any additional filing fees required under 37 CFR § 1.17
- ☒ If filing fee is not enclosed herewith, the filing fee(s) required to Deposit Account No. **22-0185**.

Name (Print/Type)	Burton A. Amernick	Registration No. (Attorney/Agent)	24,852
Signature	 Stanley S. Green 24,351		Date  August 28, 2001